Good morning Mr. Chairman and Members of the Subcommittee. I am Mary Mundt, Dean and Professor of the School of Nursing at the University of Louisville in Louisville, Kentucky. I thank you for this opportunity to address the Subcommittee on issues related to the nursing shortage and to present the recommendations of the American Association of Colleges of Nursing (AACN) for funding nursing education and research programs. AACN represents over 570 senior colleges and universities across the United States with baccalaureate and graduate nursing education programs. These institutions are responsible for educating about half of our nation's registered nurses (RNs) and all of the nurse faculty and researchers in the U.S.

Mr. Chairman, I suspect that you are well aware of the effects that the shortage of registered nurses has had on the entire country. Hospitals are forced to close entire patient care units; ambulances are being diverted to other overcrowded facilities; and surgeries are being canceled due to the lack of appropriately educated and skilled RNs. Nurse vacancy rates are noted in all practice settings including long-term care, home care, and public health. In 2003 the Kentucky Hospital Association reported 1,198 RN vacancies in hospital statewide. The University of Louisville Hospital currently has 100 RN vacancies.

This well documented shortage will only worsen over the next decade according to the Bureau of Labor Statistics that just reported the need for 1.1 million new and replacement RNs by 2012. As an educator, this need is daunting. Schools of nursing across the nation must immediately increase their enrollments by 40% to address the need for a larger nursing workforce. According to AACN's latest survey of nursing schools, enrollment in baccalaureate nursing programs increased by almost 17% in 2003. This year marks the third year of enrollment increases, which had declined steadily from 1995 to 2000 when our schools lost over 23,000 students. The increased enrollments in nursing schools is very good news, and we must thank our forward thinking Members of Congress for their federal focus on the nursing shortage, which includes the enactment of the Nurse Reinvestment Act in 2002. And, Mr. Chairman, I want to thank you and the Subcommittee for your increased appropriations for these programs over the last several years. It has provided the incentive to expand the capacity at schools of nursing nationwide.

Despite recent gains, almost 16,000 qualified students were turned away from baccalaureate nursing programs in 2003 due to limited numbers of faculty, clinical sites, and classroom space. At the University of Louisville we have almost doubled our undergraduate enrollment through increasing admissions to existing programs, establishing new options such as 15-month accelerated program, and creating partnerships with local health systems. Even with these efforts, we are turning away qualified applicants. Without increased federal support, future growth in nursing education programs may be limited despite the rising demand for nursing care.

I have been the Dean at the University of Louisville for the last seven years and during that time the shortage of nurse faculty and impending faculty retirements has become the greatest threat to meeting the current and future need for nurses. The majority of AACN member nursing schools report great difficulty filling budgeted faculty positions. I have five to seven vacant faculty positions and two pending retirements at the University of Louisville. We are making every effort to increase enrollment in the master's program and encourage careers in teaching. In addition, we have developed a new PhD program with an accelerated option to decrease degree completion time. In addition, building future faculty will require strengthening the capacity for

nursing research and integrating nurse researchers on interdisciplinary teams in the NIH Roadmap. Considering the needs for increased educational capacity and the effects that an unresolved nursing shortage will have on the future of health care in America, I must ask the Subcommittee to graciously consider the following federal funding requests:

Nursing Workforce Development -- AACN recommends a \$205 million funding level for Nursing Workforce Development for FY 2005. Mr. Chairman, we are here today to ask for increased funding for Nursing Workforce Development (Title VIII, Public Health Service Act) programs. These programs give federal focus to the supply and distribution of qualified nurses to meet our nation's health care needs. They include the authorities from the Nurse Reinvestment Act (P.L. 107-205) enacted in 2002. Nursing Workforce Development programs support schools of nursing through grants to increase nursing workforce diversity and educate advanced practice nurses such as nurse practitioners and nurse midwives who provide primary care to underserved populations. Grants to schools may also focus on nursing education, practice and retention of the existing workforce. Nursing Workforce Development is the largest source of federal funding targeted to nursing education. In FY 2003, these programs supported the recruitment, education, and retention of 24,000 nurses and nursing students.

One program that stands out is the **Nurse Faculty Loan Program** that establishes a student loan fund at schools of nursing to increase the number of qualified nurse faculty. Students may pursue a master's or doctoral degree and must agree to teach at a school of nursing in exchange for cancellation of up to 85% of their educational loans. In FY 2003, 65 applications were submitted and 55 grants were awarded. The Faculty Loan Program received \$4.87 million in FY 2004; however, additional funding directed to this program will assist in resolving the faculty shortage.

**National Institute of Nursing Research** – To support needed nursing research, we respectfully request a *FY 2005 funding level of \$160 million for the National Institute of Nursing Research (NINR)*. The Subcommittee's ongoing investment in NINR is well justified since nursing research develops new knowledge for improving caregiving and patient outcomes. NINR supports significant research on health disparities in diseases such as diabetes and cardiovascular disease, self-management of chronic pain, and end-of-life care; all priority issues for the National Institutes of Health. At the University of Louisville, NIH/NINR sponsored research has been conducted in end-of-life care, health disparities and mental health, maternal child health, and exercise as an intervention for improving health status in various populations. Further, the NINR directs 8% of its budget to research training to help develop the pool of nurse researchers who also become faculty. Training dollars supported approximately 193 pre-doctoral nurse researchers and 70 post-doctoral researchers this year. Given the nurse faculty shortage, we recommend a significant increase in appropriations for training for pre- and post-doctoral researchers.

**Conclusion -** Mr. Chairman, thank you for the opportunity to speak to you today. It has been fascinating to hear about all the very important programs and initiatives that you must consider funding. My fear is that in the near future, the people here today will not get the care they need and deserve. If there are no nurses to answer your call bell at 2:00 am or staff an operating room for a critical surgery, who will take care of us? I would be happy to answer any questions.